

## United States Department of the Interior

#### FISH AND WILDLIFE SERVICE Washington, D.C. 20240

**DIRECTOR'S ORDER NO. 121** 

Subject: Volunteer Monetary Awards

**Sec. 1 Can the Service give monetary awards to volunteers?** The National Wildlife Refuge System Volunteer and Community Partnership Enhancement Act of 1998 allows us to give volunteers nominal monetary awards in recognition of their contributions to the Government.

**Sec. 2 When should I give a monetary award to a volunteer?** We encourage you to give a monetary award when a volunteer has demonstrated exemplary performance of duties that you would like to recognize in a special way. This monetary award gives you another option for recognizing the value of exceptional volunteer contributions. The items mentioned below represent a few possible impacts that a monetary award may have on your volunteer. Consider these (and other) items carefully before giving a monetary award. You may want to ask whether the volunteer really wants a monetary award or would he/she prefer recognition of another type.

- a. A monetary award may affect the volunteer's tax status. Some individuals must maintain a cap on their income to be eligible for certain benefits (e.g., Social Security, Status for School Loans, Disability Benefits, etc.). Volunteers who receive monetary awards should refer any questions regarding monetary awards and tax status to their tax advisers.
  - b. Internal Revenue Service issues to be aware of are:
  - (1) A large monetary award may put the volunteer into another (higher) tax bracket.
  - (2) A large monetary award may cause the IRS to flag tax record for audit.
- (3) A monetary award may change the ability of the volunteer to claim his/her volunteer time as a charitable contribution.
- (4) Giving a monetary award may jeopardize a person's status as a volunteer under regulations of the Fair Labor Standards Act (FLSA). The FLSA and the Department of Labor may question if the person is a contractor or if the payment of funds constitutes a subsidy.

- **Sec. 3 How can I give a volunteer a monetary award?** Use FWS Form 3-2177 (Volunteer Monetary Award Certification) (Exhibit 1) for all volunteer monetary awards. In the "Justification" section, provide a brief summary of the accomplishment recognized by the award, using specific examples.
- **Sec. 4 What amount can I give as a monetary award?** We limit monetary awards to volunteers to two awards per calendar year and normally to \$100 per award. This does not mean that we cannot give a volunteer who contributes an unusual number of hours and substantially benefits the mission of the Fish and Wildlife Service a monetary award above \$100. The amount of the award should be commensurate with the value of the contribution of the individual and with consideration to the overall benefit to the Government. The same contribution cannot be rewarded more than once.

## Sec. 5 How do I process the paperwork?

- a. Complete FWS Form 3-2177 (Volunteer Monetary Award Certification) (Exhibit 1) and attach a copy of the Volunteer Services Agreement. The National Business Center will not process the award unless you attach the agreement.
- (1) If the volunteer chooses to receive payment electronically, complete the ACH Vendor/Miscellaneous Payment Enrollment Form (Exhibit 2).
- (2) If the volunteer chooses not to receive payment electronically, complete the FFS Vendor Updating Document (Exhibit 3).
- b. Forward all forms to the National Business Center for processing. This is important to ensure payment of the award and generation of the Form 1099, mailed to the volunteer at the end of the calendar year for income tax purposes. Failure to follow approved procedures may result in fines and penalties to the volunteer and the Service.
- **Sec. 6 Are all volunteers eligible?** Our employees who serve as volunteers are not eligible to receive monetary awards. Family members of our employees that volunteer may receive monetary awards.
- **Sec. 7 Who approves volunteer monetary awards?** The project leader/manager of a facility giving the award will approve the award with the exception of employee family members. When an award is given to a family member of an employee, the approval must be elevated to the project leader/manager's supervisor. We require second level approval when giving a monetary award to a family member of ANY Service employee OR when the amount of the award exceeds \$100.
- **Sec. 8 How should I present the award?** You must present all monetary awards publicly (in the presence of employees or others) to avoid any appearance of impropriety or conflict of interest. For example: a staff meeting where there are more than two people in

attendance, volunteer award dinner, or any other public meeting where recognition of the award is appropriate and/or meaningful to the volunteer. Public presentation of the award serves to recognize the volunteer in front of others and acts to reinforce the sincerity in desire to share the volunteer's achievement. It also serves to avoid any perceptions of conflict of interest.

**Sec. 9 What responsibilities do the volunteers have?** We will issue award recipients a Form 1099 at the end of the calendar year, which they must report on their individual income taxes as miscellaneous income. It is the responsibility of the volunteer to properly report the funds received to the IRS.

**Sec 10 When is this Order effective?** This Order is effective immediately. It will expire on March 31, 2001, unless amended, superseded, or revoked. We will incorporate its contents into the Fish and Wildlife Service Manual.

DIRECTOR

Date: March 20, 2000



# Volunteer Monetary Award Certification

| This Award  | Is Presented to:  |                           |  |
|---|---|---------------------------|--|
|   | (1  | Recipient'                | s Name)  |
| In the G  | ross Amount of \$                                       |                           | ·  |
| JUSTIFICATI                                       | ON Required for moneta                                  | ry awards.                |  |
|   |   |                           |  |
|   |   |                           |  |
|   |   |                           |  |
| APPROVED BY:                                      | Project Leader/Manager                                  | Date                      | Telephone Number ( including Area Code)                  |
|   | SIGNATURES ureau delegations]                           |                           |  |
| Supervisor*                                       | Date  |                           |  |
| *Second Level ap<br>employee or whe               | oproval is required when g<br>n the amount of the award | iving a mo                | onetary award to a family member of any Service 100.     |
|   | ACTION RECORD ds. Do not complete for Ho                | This record<br>nor Awards | is to initiate payment, accounting and tax transactions. |
| Recipient Name: _                                 |   |                           | Social Security Number:                                  |
| Budget Object Clas Organization Code Subactivity: | •   |                           |  |

Disposition of this form: Original to finance office, copy to recipient.

Note: Information on this form is protected by the Privacy Act. Disclosure may be made only to authorized persons according to Title 5 U.S.C., Section 552a(b).

# ACH VENDOR/MISCELLANEOUS PAYMENT ENROLLMENT FORM

OMB No. 1510-0056 Expiration Date 01/31/2000

Exhibit 2

This form is used for Automated Clearing House (ACH) payments with an addendum record that contains payment-related information processed through the Vendor Express Program. Recipients of these payments should bring this information to the attention of their financial institution when presenting this form for completion.

### PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data, by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

| <u> </u>                   | AGENCY INFO                 | DMATION                    |
|----------------------------|-----------------------------|----------------------------|
| FEDERAL PROGRAM AGENO      |                             | NIMA I I VIT               |
|                            |                             |                            |
| AGENCY IDENTIFIER:         | AGENCY LOCATION CODE (ALC): | ACH FORMAT:                |
| ADDRESS:                   |                             | CONT CONT CONT             |
|                            |                             |                            |
|                            |                             |                            |
| CONTACT PERSON NAME:       |                             | TELEPHONE NUMBER:          |
|                            |                             | ( )                        |
| ADDITIONAL INFORMATION     | :                           |                            |
|                            | PAYEE/COMPANY               | INFORMATION                |
| NAME                       | PATEE/GUIVIPANT             | SSN NO. OR TAXPAYER ID NO. |
|                            |                             |                            |
| ADDRESS                    |                             |                            |
|                            |                             |                            |
|                            |                             |                            |
| CONTACT PERSON NAME:       |                             | TELEPHONE NUMBER:          |
|                            |                             | ( )                        |
|                            | CIMANOLAL INSTITUTE         | AN INCAMA STATE            |
| NAME:                      | FINANCIAL INSTITUTI         | UN INFORMATION             |
| •                          |                             |                            |
| ADDRESS:                   |                             |                            |
|                            |                             |                            |
|                            |                             |                            |
| ACH COORDINATOR NAME:      |                             | TELEPHONE NUMBER:          |
| AGI COOMBINATOR NAME.      |                             | TELEPHONE NOMBER:          |
| NINE-DIGIT ROUTING TRANS   | IT NUMBER:                  |                            |
|                            | <del></del>                 |                            |
| DEPOSITOR ACCOUNT TITLE    |                             |                            |
|                            |                             |                            |
| DEPOSITOR ACCOUNT NUME     | BER:                        | LOCKBOX NUMBER:            |
| TYPE OF ACCOUNT:           |                             |                            |
| or Addodni,                | CHECKING SAVINGS            | LOCKBOX                    |
| SIGNATURE AND TITLE OF A   | UTHORIZED OFFICIAL:         | TELEPHONE NUMBER:          |
| Could be the same as ACH C | coordinator)                |                            |
|                            |                             | ( )                        |
| ISN 7540 01 074 0005       |                             | SE 3881 (Pey 12/00)        |

SF 3881 (Rev 12/90) Prescribed by Department of Treasury 31 U S C 3322; 31 CFR 210

# FAX TRANSMITTAL FORM

## U.S. FISH AND WILDLIFE SERVICE

| DATE:                | PAC                       | GE I OF   |                   |  |  |  |  |
|----------------------|---------------------------|---|-------------------|--|--|--|--|
| FINANCE CEN          | ITER                      | NVICE Attn: Kares  OMMERCIAL NO. (303) 9              |                   |  |  |  |  |
| FROM:<br>FAX NUMBER: | OM: COMMERCIAL NUMBER:    |   |                   |  |  |  |  |
|                      | DE<br>U.S                 | PARTMENT OF THE INTERIOR<br>FISH AND WILDLIFE SERVICE |                   |  |  |  |  |
|                      | FFS '                     | VENDOR UPDATING DOCUMENT                              |                   |  |  |  |  |
|                      | ACTION REQUIRE            | D: ADD VENDOR   |                   |  |  |  |  |
|                      |                           | ADD ADDRESS _   | CHANGE ADDRESS    |  |  |  |  |
|                      |                           | ADD TIN NUMBER  |                   |  |  |  |  |
|                      |                           | SUFFIX CODE   |                   |  |  |  |  |
|                      |                           | VENDOR NUMBER 3-                                      |                   |  |  |  |  |
|                      |                           | OTHER   |                   |  |  |  |  |
|                      | VENDOR NAME               | (EXACTLY AS IT SHOULD APPE                            | TAR ON THE CHECK) |  |  |  |  |
|                      | ADDRESS LINE I            |   |                   |  |  |  |  |
|                      | ADDRESS LINE 2            |   |                   |  |  |  |  |
|                      | ADDRESS LINE 3 TIN NUMBER | (CITY, STATE, ZIP CODE)                               |                   |  |  |  |  |
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|                      |                           | AL GOVERNMENT<br>GOVERNMENT                           | CIRCLE ONE)       |  |  |  |  |
|                      |                           | DOCUMENT ATTACHED:                                    |                   |  |  |  |  |
|                      |                           | OBLIGATION  |                   |  |  |  |  |
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|                      |                           |   |                   |  |  |  |  |
| UPDATING COM         | PLETED:                   | BY:   |                   |  |  |  |  |
| RETURN TO:           |                           | 0201247031  | CODE:             |  |  |  |  |
| STATION NAME: _      |                           | ORGANIZATION COMMERCIAL NI                            | JMBER:            |  |  |  |  |